ENVIRONMENTAL COMPLIANCE ASSESSMENT SYSTEM AUDIT REPORT

DEFENSE NATIONAL STOCKPILE CENTER NEW HAVEN, INDIANA



Prepared For:

U.S. Army Engineering and Support Center, Huntsville 4820 University Square Huntsville, Alabama 35816-1822 ATTN: CEHNC-IS-FS

AND

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April 2004

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LIST OF ACRONYMS

ACM Asbestos-containing material AST Aboveground storage tank

Bhate Environmental Associates, Inc.

BRAC Base Realignment and Closure

CEHNC U.S. Army Engineering and Support Center, Huntsville

CERCLA Comprehensive Environmental Response, Compensation, and Liability Act
CERLCLIS Comprehensive Environmental Response, Compensation, and Liability

Information System

CESQG Conditionally Exempt Small Quantity Generator

CFR Code of Federal Regulations

CHPPM Center for Health Promotion and Preventive Medicine

COC Chemical of concern

DD Form Department of Defense Form DLA Defense Logistics Agency

DNSC Defense National Stockpile Center

DoD Department of Defense
DOT Department of Transportation

ECAS Environmental Compliance Assessment System

EMS Environmental Management System EPA Environmental Protection Agency

EPCRA Emergency Planning and Community Right-to-Know Act

ESOH Environmental, Safety, and Occupational Health

FY Fiscal year

GSA Government Services Agency

H&S Health and safety
ID Identification (number)

IDEM Indiana Department of Environmental Management

IRP Installation Restoration Program
ISC Integrated Spill Contingency (Plan)

LBP Lead-based paint

LUST Leaking underground storage tank

MP Management Practice
MSDS Material Safety Data Sheet

N/A Not applicable

NEPA National Environmental Policy Act NFPA National Fire Protection Association

NOV Notice of Violation

NPDES National Pollutant Discharge Elimination System

NPL National Priorities List

OSHA Occupational Safety and Health Administration

PA Preliminary Assessment PCBs Polychlorinated biphenyls pCi/L PicoCuries per liter
PE Professional Engineer
PMP Pesticide Management Plan
POL Petroleum, oil, and lubricant

POS Positive

PPE Personal protective equipment

ppm Parts per million

QEP Qualified Environmental Professional RCRA Resource Conservation and Recovery Act

RCS Report Control Symbol

SIC Standard Industrial Classification

SPCC Spill Prevention, Control, and Countermeasures (Plan)

SWPPP Storm Water Pollution Prevention Plan

TEAM The Environmental Assessment and Management (Guide)

TPH Total petroleum hydrocarbons

USACERL U.S. Army Construction Engineering Research Laboratories

USDA U.S. Department of Agriculture UST Underground storage tank

1 EXECUTIVE SUMMARY

An Environmental Compliance Assessment System (ECAS) audit was conducted at the Defense Logistics Agency's (DLA) Defense National Stockpile Center (DNSC)-New Haven, Indiana, facility on February 5-6, 2004, by personnel from Bhate Environmental Associates, Inc. (Bhate), under contract to the U.S. Army Engineering and Support Center, Huntsville (CEHNC). The Environmental Protection Specialist and Acting Depot Manager were on site during the audit site visit.

Eleven Class I findings were found in three of the 13 protocol sections and include:

- Hazardous Waste Management
- Petroleum, Oil, and Lubricant (POL) Management
- Storage Tank Management

Two Class II findings were identified and were associated with:

- Hazardous Waste Management
- POL Management

Six Class III findings were identified and were associated with:

- Hazardous Waste Management
- Other Environmental Issues (Environmental Management Systems [EMS])
- Pesticide Management
- Toxic Substances Management
- Wastewater Management

Six Health and Safety (H&S) findings were identified in one of the 13 protocol sections (Hazardous Materials Management).

None of the findings were identified as a "Repeat" finding from the ECAS audit performed by Harding ESE, Inc., in 2001.

One of the identified findings was determined to be "Significant," meaning that one of the findings, relating to Storage Tank Management, poses a substantial threat to human health, the environment, or the mission.

A summary of the number of findings in each protocol category is presented in Table 1-1.

Table 1-1. Summary of Findings

-T. 10. 20.	Environmental Area	1	1	III	E/S	III Positive
1	Air Emissions Management	0	0	0	0	0
2	Cultural Resources Management	0	0	0	0	0
3	Hazardous Materials Management	0	0	. 0	6	0
4	Hazardous Waste Management	3	1	1	0	0
5	Natural Resources Management	0	0	0	0	0
6	Other Environmental Issues		-			,
	NEPA Process	-0	0	0	0	0
	Environmental Noise	0	0	0	0	0
	Installation Restoration Program	0	0	0	0	0
	Pollution Prevention	0	0	0	0	0
	Program Management	0	0	0	0	0
	Waste Military Munitions	0	0	0	0	0
	Environmental Management Systems	0	0	2	0	0
7.	Pesticide Management	0	0	1	0	0
8	Petroleum, Oil, and Lubricant Management	4	0	0	0	0
9	Solid Waste Management	0	0	0	0	0
10	Storage Tank Management	5	0	0	0	0
11	Toxic Substances Management					
	PCBs	0	0	0	0	0
	Asbestos	0	0	1	0	0
	Radon	0	0	0	0	0
	Lead-Based Paint	0	0	0	0	0
12	Wastewater Management (incl. stormwater)	0	0	1	0	0
13	Water Quality Management	0	0	0	0	0
Subto	tals	11	2	6	6	0
Totals			25	5		0

Section 2 describes the background and scope of the project. Section 3 describes the background of DNSC-New Haven. Section 4 summarizes the findings by protocol area, including the category, criteria, condition, and status of corrective action of each finding. Section 5 describes the findings in greater detail and the facility's compliance status. Detailed finding sheets are

presented in Section 6. References are listed in Section 7. Photographs referenced throughout this report are included in Appendix A.

2 BACKGROUND AND SCOPE

The following sections describe the background and scope for the ECAS audit and the procedures used to evaluate regulatory compliance at the DNSC-New Haven facility.

2.1 Background

The U.S. Army Construction Engineering Research Laboratories (USACERL), in cooperation with Department of Defense (DoD) components, including the DLA, developed *The Environmental Assessment and Management (TEAM) Guide* to evaluate compliance with federal, state, and local environmental regulatory statutes and programs, and to identify solutions for existing or potential problems.

The overall mission of the ECAS audit program is to improve DLA compliance with applicable environmental regulations, reduce the number of compliance deficiencies, and subsequently reduce the number of Notices of Violations (NOVs) from regulatory agencies. Results of the assessment help the facility address immediate problems and allocate resources for correction of long-term issues.

Under contract to CEHNC, Bhate conducted an independent ECAS audit of the DLA's DNSC-New Haven, Indiana, facility to assess regulatory compliance with applicable federal, State, and local environmental regulations for 13 compliance protocol areas. The assessment was performed by two Bhate personnel (Ms. Diane Lazarus, Qualified Environmental Professional (QEP), and Mr. Andrew Rider, Professional Engineer (PE)) on February 4 and 6, 2004. The following documents were used to assess compliance:

- The TEAM Guide, September 2003
- The Indiana Supplement to the TEAM Guide, July 2003
- The Army Corps of Engineers Supplement to the TEAM Guide, March 2003
- Indiana regulations, provided by the Indiana Department of Environmental Management (IDEM) (http://www.in.gov/idem/)

The following 13 compliance protocols were assessed by the ECAS audit team:

- 1. Air Emissions Management
- 2. Cultural Resources Management
- 3. Hazardous Materials Management
- 4. Hazardous Waste Management
- 5. Natural Resources Management
- 6. Other Environmental Issues
 - National Environmental Policy Act (NEPA) process

- Environmental Noise
- Installation Restoration Program (IRP)
- Pollution Prevention
- Program Management
- Waste Military Munitions
- EMS
- 7. Pesticide Management
- 8. POL Management
- 9. Solid Waste Management
- 10. Storage Tank Management
- 11. Toxic Substances Management
 - Polychlorinated biphenyls (PCBs)
 - Asbestos
 - Radon
 - Lead-Based Paint (LBP)
- 12. Wastewater Management
- 13. Water Quality Management

2.2 Scope

Assessment of the DNSC-New Haven facility was accomplished through four separate tasks:

- 1. Document Review
- 2. Site Visit
- 3. Draft ECAS Audit Report
- 4. Final ECAS Audit Report

Task 1 involved a review of applicable environmental regulations and documents to become acquainted with the installation, a review of applicable documentation, and coordination of the upcoming assessment with DNSC contacts. In addition, State and DoD-specific protocols were reviewed.

Task 2 included:

- An informal briefing with onsite personnel
- The site visit, during which onsite personnel were interviewed, records reviewed, and operations assessed for the entire facility
- A formal exit briefing at which a summary of the ECAS audit results was discussed with Mr. Rob Skruck, Environmental Specialist; Ms. Nikki Horther, Acting Depot Manager; Mr. Ken Flood, Foreman; and Mr. Dale Arnos

Task 3 included further research of preliminary findings identified during the site visit and preparation and submittal of the draft report.

Task 4 involved incorporating government comments into the report and submitting the final report.

3 DNSC-NEW HAVEN BACKGROUND

DNSC-New Haven is located in the City of New Haven, Indiana. DNSC-New Haven's mission is to procure, store, and maintain strategic and critical materials for national defense.

DNSC-New Haven is located on approximately 628 acres of land owned by, and leased from, the Government Services Agency (GSA). The Depot is located in an industrial and agricultural area. A 7-foot chain-link fence topped with three strands of barbed wire at an approximate 45 degree angle (total approximately 8 feet) surrounds the facility.

The DNSC facility consists of a total of 17 permanent buildings. The buildings include the:

- Administrative building (T-111)
- Five warehouses (T-211, T-212, T-213, T-214, and T-215)
- · Guard house
- Two fire water pump houses (T-304 and T-133)
- Lumber shed (T-147)
- High tank building
- Former cafeteria building (T-130)
- Maintenance building (T-127)
- Equipment building (no building number)
- Scale house (T-219a)
- Gasoline storage building (T-119)
- Former pump building for former gasoline underground storage tank (T-118)

All of the warehouses are ground-level concrete-block buildings with open wood rafters, except that two of the warehouses have small former boiler basement areas.

Outdoor storage areas cover approximately 50 percent of the total facility acreage. Strategic materials at the DNSC-New Haven Depot are currently stored both inside the warehouses and outside.

The DSNC-New Haven Depot property was originally developed as the New Haven Depot in 1942, with most construction occurring between 1942 and 1943. According to the *Cultural Resources Assessment* (U.S. Department of Agriculture (USDA) Forest Service, February 1999), the New Haven Depot was designated as the New Haven Ordnance Depot, and then the Casad Ordnance Depot in 1943. The Depot was active from 1943 until 1947, when it was reverted to the Corps of Engineers in a surplus standby status.

In 1948, the Depot was redesignated the Casad Engineer Depot and was used for the storage of strategic and critical materials procured by the Treasury Department. Additional buildings (warehouses, central heating plant) were constructed in 1953 and 1954. The property was transferred from the Corps of Engineers to the GSA in 1955. In July 1988, the operation of the New Haven Depot became the responsibility of the DLA.

Materials are stored in warehouses in drums or crates and include ferrochrome, tungsten, cadmium, manganese, lead, graphite, beryllium, tin, talc, iodine, cobalt, quartz, chrome metal, thorium nitrate, and mercury. Baled ingots of lead and piles of fluorspar are also stored inside warehouses. Stockpiled materials stored outside consist of piles of ferrochrome and ferromanganese.

Unmanned satellite facilities that are the responsibility of the DNSC-New Haven were not included in the ECAS audit scope of work.

4 SUMMARY OF FINDINGS

This section provides a summary of regulatory and management findings observed during the ECAS audit. Table 4-1 addresses each finding by protocol area and cites the regulatory procedure and requirement for the finding. The table describes the condition observed and provides the status of corrective action. The Finding Identification Number (ID) provides a numerical method of identifying the finding. The protocol area is designated by the TEAM Guide. The Class is assigned by the auditors according to the TEAM Guide (described in greater detail in Sections 1 and 5). The Criteria is the regulatory citation or other document (e.g., permit, plans, etc.). If the finding is based on a management practice, the Criteria are identified as a Management Practice (MP). Condition briefly describes the auditors' observation. Finally, the status of the corrective action is identified (open or closed).

Individual finding sheets for each protocol are provided in Section 6 of this Report. The findings are classified as Class I, II, III, or H&S (Health & Safety) as described below:

- Class I Findings: Immediate noncompliance with an existing environmental regulation, compliance agreement, consent order, operating/discharge permit, or existing NOV.
- Class II Findings: Future noncompliance with an environmental regulation, compliance agreement, consent order, or an existing NOV.
- Class III Findings: Findings for which there are no specific federal, State, or local regulatory requirements. These findings will include deviations from DLA regulations, DoD directives, or MPs. Class III findings may be positive (POS) or negative.
- H&S Findings: These findings are related to Occupational Safety and Health Administration (OSHA), Department of Transportation (DOT), and National Fire Protection Association (NFPA) regulations and standards. Most H&S findings are in the Hazardous Materials Management (e.g., Section 3) protocol. H&S findings may be regulatory but are not part of the Report Control Symbol (RCS) 1383 reporting process and not eligible for environmental funding. H&S findings are not classified as Class I, II, or III.

A finding sub-categorized as "significant" requires immediate attention. It poses, or has a high likelihood to pose, a direct and immediate threat to human health, safety, the environment, or the mission. One "significant" finding was identified during this ECAS audit.

A finding status is identified as "open" if a finding can be resolved or corrected. Findings are "closed" if the finding has been resolved or corrected. Descriptions of the corrective actions taken are provided in the finding sheets in Section 6.

Table 4-1. Environmental Compliance Assessment Findings Summary Table

Finding ID	Protocol Area	Class	Criteria	Condition	Status of Corrective Action
001	Hazardous Materials Management	H&S	HM.1.4.US. Specific housekeeping requirements must be met in areas where hazardous materials are stored.	In Warehouse T-213, Section 1, several containers of hazardous materials were corroded and leaking. Containers of hazardous materials must not be leaking.	Closed
002	Hazardous Materials Management	H&S	HM.1.3.US. Containers of hazardous chemicals in the workplace are required to be labeled, tagged or marked with specific information.	In Warehouse T-213, Section 1, a clear glass 1-gallon container with a yellowish clear liquid was not labeled. In Building T-127, a white 5-gallon bucket containing approximately 2 inches of an unknown material was not labeled. Containers of hazardous materials must be labeled.	Closed
003	Hazardous Materials Management	H&S	HM.10.2.US. Personnel working with hazardous materials are required to be trained in their use and the potential hazards of such materials.	Documentation that all employees have received hazardous communication training was not found in the employee files.	Open
004	Hazardous Materials Management	H&S	HM.35.4.US. Storage cabinets used for the storage of flammable/combustible liquids must meet specific requirements.	In the motor pool in Building T-111, approximately 20 one gallon containers of Zinc Oxide Paint, which were labeled as flammable materials, were stored in a wooden locker. The wooden locker did not meet the requirements for storing flammable/combustible liquids.	Open

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria manta de la companya de la	*Condition	Status of Corrective Action
005	Hazardous Materials Management	H&S	HM.35.6.US. Flammable/combustible storage rooms inside of buildings must meet certain specifications.	In Building T-111 (Motor Pool), flammable materials (two containers of Rubbing Alcohol) were stored on a shelf and two aerosol paint cans were stored in a metal cabinet. The shelf does not meet the requirements for flammable/combustible materials storage. These containers were placed in the appropriate cabinets immediately upon identification of the condition during the audit site visit.	Open
				In Warehouse T-214, Section 4, three containers of vinyl cement, a flammable material, were stored on a wooden table. The table does not meet the requirements for flammable/combustible materials storage.	
				In Building T-127, an aerosol can of high visibility fluorescent paint was stored on a shelf. The shelf does not meet the requirements for flammable/combustible materials storage.	
006	Hazardous Materials Management	H&S	HM.40.2.US. Incidental storage of flammable/combustible liquids in industrial areas must conform to certain requirements.	In Warehouse T-215, Section 2, hazardous materials containers of hydraulic oil and Spinesstic, combustible materials, were left open. Containers of flammable/combustible materials must be kept closed when not in use.	Open

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Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria	Condition (1997)	Status of Corrective Action
007	Hazardous Waste Management	II	HW.10.1.US. Generators of solid waste must determine if the wastes are hazardous wastes.	Two drums in the Old Cafeteria, Building T-130, were found. One drum was labeled "Lead Contaminated Clothing". The other contained empty urethane sealant tubes and personal protective equipment (PPE). The contents of these drums have not been characterized as hazardous or solid waste.	Closed
008	Hazardous Waste Management	Ш	HW.15.2.US. CESQG [Conditionally Exempt Small Quantity Generator] personnel who handle hazardous waste should meet certain training requirements. Verify that an annual review of initial training is provided.	Documentation of annual hazardous waste refresher training was not found in the employee files.	Open
009	Hazardous Waste Management	I	HW.280.2.US. Small quantity handlers of universal waste are required to meet specific accumulation time limits.	No markings or inventory were available to demonstrate the length of time that the spent fluorescent lamps had been accumulated.	Open
010	Hazardous Waste Management	I	HW.290.6.US. Small quantity handlers of universal waste are required to manage universal waste lamps according to specific parameters.	The used lamps in the Building T-127, were not being managed properly. Used lamps were stored in boxes that were not closed.	Open
011	Hazardous Waste Management	I	HW.300.1.US. Employees who handle or have responsibility for managing universal wastes are required to be trained.	Personnel have not been trained on the proper handling and emergency procedures for handling universal waste.	Open

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria	Condition	Status of Corrective Action
012	Other Environmental Issues	Ш	O7.30.1.US. Facility personnel should be made aware of their environmental responsibilities.	The Acting Depot Manager was not aware of all of her environmental responsibilities. She was not aware of her responsibility to review the UST closure reports or to notify the Depot Manager or DNSC headquarters personnel of the reportable releases identified in the underground storage tank (UST) closure reports. In addition, no one took responsibility for involving the Environmental Specialist or other DNSC/DLA supporting personnel in the UST closures, notifying the State before or after the UST removals, or for notifying the State after reportable contamination was identified.	Open
013	Other Environmental Issues	III	O7.30.3.US. The facility/organization should have, and implement, internal and external communication processes on environmental management issues.	The procedures for notifying DNSC headquarters personnel or State agencies (as documented in the Integrated Spill Contingency (ISC) Plan) were not implemented when reportable contamination was identified during the UST closures.	Open

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria.	Condition	Status of Corrective Action
014	Pesticide Management	III	2003 DNSC Pest Management Plan The Depot Manager will maintain adequate records of all pest management operations performed by contractors on their sites. They will also be responsible for ensuring that a Defense National Stockpile Pest Management Report, DD [Department of Defense] Form 1532 covering any pesticide applications performed by contractors or depot personnel are completed. [] They are to be signed in ink and dated by the contractor. A copy of the label of the pesticide applied and a copy of pesticide applicator certification will be attached. [] The Depot Manager should retain the original documents on site.	The documentation provided to the Depot after the August 2003 herbicide application did not include a copy of the pesticide applicator certification.	Open
015	POL Management	I	PO.5.2.US. The SPCC [Spill Prevention, Control, and Countermeasure] plan is required to contain specific information.	The SPCC Plan does not include the current inventory of aboveground storage tanks (ASTs) located at the facility. We also recommend that, as part of the SPCC Plan update, it be rewritten to include documented procedures to be followed and emergency personnel to be contacted. We also note that the SPCC Plan identifies the tanks as containing No. 2 fuel oil, however the tanks are marked as "diesel."	Open
016	POL Management	I	PO.5.2.US. The SPCC plan is required to contain specific information.	The SPCC Plan requires that the facility perform and document monthly AST inspections. Monthly inspections are not performed or documented of the ASTs.	Open

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria	Condition	Status of Corrective Action
017	POL Management	I	PO.5.3.US. Each SPCC plan must be reviewed at least once every 5 years.	The SPCC Plan was last certified by a registered professional engineer on 12 March 1999, which requires that the SPCC Plan was scheduled for a review and update in March 2004.	Open
018	POL Management	I	PO.5.5.US. A registered professional engineer must certify each SPCC plan and any amendments and the plan and each amendment must be prepared according to sound engineering practices.	Changes to the SPCC Plan for the removal of two USTs and the addition of two ASTs were not certified by a licensed PE.	Open
019	Storage Tank Management		ST.30.2.IN. Owners/operators of UST systems must meet specific notification requirements. 329 IAC 9-2-2(g) All owners and operators of UST systems who: (1) temporarily close a tank system under 329 IAC 9-6-5; or (2) permanently close or perform a change-inservice on a tank system under 329 IAC 9-6-1; shall, within thirty (30) days of completing such action, submit notice of this action to the agency as required by subsection (a). 329 IAC 9-6-1(a) At least thirty (30) days before beginning either permanent closure or a change-inservice, the owner and operator shall notify the agency of their intent to permanently close or make the change-in-service unless such action is in response to corrective action. The required assessment of the excavation zone under section 2 of this rule must be performed: (1) after notifying the agency; and (2) before completion of the permanent closure or change-in-service.	Documentation of the UST permanent closures for the regulated tanks at Buildings T-118 and T-124 were not submitted to IDEM on the appropriate form (State Form 45223 Notification for Underground Storage Tanks) or within 30 days before tank removal. IDEM was notified that there were no longer any tanks at the facility in November 2003 when the tank fees were requested. A notation was made on the fee form that the tanks were no longer present, however this is not the method of notification required by IDEM.	Open

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Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria	Condition	Status of Corrective Action
020	020 Storage Tank I Management	nagement comply with all applicable state regulatory not beg requirements not contained in the checklist (a had TP	Further site investigation and corrective action has not begun for the UST removal area T-118 which had TPH concentrations in excavation sidewalls of over 100 parts per million (ppm).	Open	
			329 IAC 9-6-2 (c) The owner and operator shall begin site investigation and corrective action under 329 IAC 9-5 if any of the following is discovered:		
			 (1) Contaminated soils that: (A) have one (1) or more COC [chemical of concern] that is detected in an amount greater than or equal to: (i) one hundred (100) parts per million total petroleum hydrocarbons (TPH) for an on-site area; 		
021	Storage Tank Management	I	ST.2.1.IN. Federal facilities are required to comply with all applicable state regulatory requirements not contained in the checklist (a finding under this checklist item will have the citation of the applied regulation as a basis of findings).	The regulated tanks at Buildings T-118 and T-124 did not include bottom samples below the tanks. A minimum of two bottom soil samples must be taken within 2 feet below both ends of the underground storage tanks.	Open

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria	Condition	Status of Corrective Action
021			329 IAC 9-6-2 (f) Closure sampling requirements		
(Cont'd)			must be completed as follows: (1) Each underground storage tank excavation must be sampled separately. Composite samples are not acceptable for closure. The samples must meet the following requirements: (A) All samples must be discrete grab samples taken directly from the undisturbed native soil in bottom and sidewall samples. The following requirements apply to samples: (i) Bottom samples must meet the following requirements: (AA) Soil sampling and analysis must consist of a minimum of two (2) bottom soil samples taken within two (2) feet below both ends of each underground storage tank.		
			(BB) If the underground storage tank capacity is greater than ten thousand (10,000) gallons, one (1) additional sample and analysis must be taken within two (2) feet below the middle of the underground storage tank.		

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria :	Condition	Status of Corrective Action
022	Storage Tank Management	I (Signif- icant)	ST.2.1.IN. Federal facilities are required to comply with all applicable state regulatory requirements not contained in the checklist (a finding under this checklist item will have the citation of the applied regulation as a basis of findings). 329 IAC 9-6-2(h) During UST system removal, native soil and backfill that is to be returned to the underground storage tank excavation must be analyzed for contamination under subsection (g)(1) and (g)(4). The sampling and analysis must meet the following requirements: (3) The owner and operator shall contact the agency within twenty-four (24) hours to obtain a LUST [leaking UST] incident number if one (1) or more COC in the excavated native soil or backfill analyzes at greater than or equal to the detection limit listed in the table at subsection (g)(1)(A). [20 ppm for gasoline or diesel]	The presence of 4,800 ppm TPH in soil in the remaining east sidewall was identified in an August 2003 gasoline UST removal report (UST Closure Assessment; Area – T-118). Additionally, the presence of 230 ppm TPH was identified in an August 2003 diesel UST removal report (UST Closure Assessment; Area – T-124). Documentation was not found to indicate that IDEM was notified of the release; nor were facility personnel aware of a DNSC/DLA representative having contacted IDEM by telephone.	Open

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria	Condition	Status of Corrective Action
023	Storage Tank Management	Ι	ST.2.1.IN. Federal facilities are required to comply with all applicable state regulatory requirements not contained in the checklist (a finding under this checklist item will have the citation of the applied regulation as a basis of findings). 329 IAC 9-6-2(i) Closure report requirements must be completed as follows: (1) A completed closure report must consist of the following: (A) The underground storage tank notification form provided by the agency under 329 IAC 9-2-2. (B) The underground storage tank closure report form provided by the agency. (2) A completed closure report must be submitted to the agency within thirty (30) days after the regulated underground storage tank is removed from the ground or closed in place.	The closure reports did not include the State Form 45223 Notification for Underground Storage Tanks. The closure assessments (for Area T-111 dated August 12, 2003; and Area T-124 dated August 20, 2003) were not submitted to IDEM within 30 days after the USTs were removed (in June 2003).	Open
024	Toxic Substances Management		T2.2.2.US. Risk management techniques should be promoted in environmental efforts. DNSC Asbestos Policy, March 7, 2000: All DNSC facilities shall be surveyed annually to locate and record the existence of ACM [asbestos-containing material], its condition, and potential for damage. A copy of the survey is to be sent to the DNSC Environmental Office by the 15 th of January each year.	The last asbestos survey available was dated February 2001. DNSC-New Haven must update their survey and submit it to the DNSC Environmental Office.	Open

Table 4-1. Environmental Compliance Assessment Findings Summary Table (Continued)

Finding ID	Protocol Area	Class	Criteria	Condition	Status of Corrective Action
025	Wastewater Management	Ш	WA.2.3.US. Facilities should go above and beyond statutory and regulatory compliance.	A draft Storm Water Pollution Prevention Plan (SWPPP) has been prepared for the facility, but does not meet all the Indiana requirements for a SWPPP for a permitted facility.	Open

5 REGULATORY COMPLIANCE STATUS

5.1 Introduction

In the following sections, the assessment summary describes the areas inspected and the records reviewed. No physical or chemical samples were taken as part of this assessment. The findings summary describes the overall compliance status of each protocol area. Individual finding sheets for each protocol are provided in Section 6 of this Report.

5.2 Air Emissions Management

5.2.1 Assessment Summary

Three diesel-fired emergency generators with associated fuel tanks are present at the Depot. In addition, one diesel AST and one gasoline AST for vehicular fueling are used at the Depot. Natural gas is used for heating the administration building.

5.2.2 Findings Summary

No findings regarding air emissions management were identified.

5.3 Cultural Resources Management

5.3.1 Assessment Summary

The Cultural Resources Assessment for the Defense Logistics Agency, Defense National Stockpile Center, City of New Haven, Allen County, Indiana (USDA Forest Service, February 1999) determined that no prehistoric or historic archeological properties were identified at DNSC-New Haven. Because all of the Depot buildings are determined not eligible for listing on the National Register of Historic Places, they are not significant cultural properties and do not need to be considered when planning future management activities. No changes have been made to the facility since 1999 that would warrant a change to the conclusion.

5.3.2 Findings Summary

No findings regarding cultural resources management were identified.

5.4 Hazardous Materials Management

5.4.1 Assessment Summary

DNSC-New Haven maintains the following types of hazardous materials: diesel, gasoline, oils and greases, antifreeze, paint, thinner, aerosol cans, cement, de-icers, solvents, and other

materials for routine maintenance. Material safety data sheets (MSDSs), emergency spill response plans, hazardous material storage and handling procedures were reviewed.

5.4.2 Findings Summary

In Warehouse T-213, Section 1, several containers of hazardous materials were corroded and leaking. (Appendix A, Photograph 1) Containers of hazardous materials must not be leaking. (Finding 001)

In Warehouse T-213, Section 1, a clear glass 1-gallon container with a yellowish clear liquid was not labeled. In Building T-127, a white 5-gallon bucket containing approximately 2 inches of an unknown material was not labeled. Containers of hazardous materials must be labeled. (Finding 002)

Documentation that all employees have received hazardous communication training was not found in the Depot's employee files. (Finding 003)

In the motor pool in Building T-111, approximately 20 1-gallon containers of Zinc Oxide Paint, which were labeled as flammable materials, were stored in a wooden locker. (Appendix A, Photograph 2) The wooden locker does not meet the requirements for storing flammable/combustible liquids. (Finding 004)

In the Building T-111 Motor Pool, flammable materials (two containers of Rubbing Alcohol) were stored on a shelf and two aerosol paint cans were stored in a metal cabinet. The shelf does not meet the requirements for flammable/combustible materials storage. These containers were placed in the appropriate cabinets immediately upon identification of the condition during the audit site visit. In Warehouse T-214, Section 4, three containers of vinyl cement, a flammable material, were stored on a wooden table. The table does not meet the requirements for flammable/combustible materials storage. In Building T-127, an aerosol can of high visibility fluorescent paint was stored on a shelf. The shelf does not meet the requirements for flammable/combustible materials storage. (Finding 005)

In Warehouse T-215, Section 2, hazardous materials containers of hydraulic oil and Spinesstic, combustible materials, were left open. (Appendix A, Photograph 3) Containers of flammable/combustible materials must be kept closed when not in use. (Finding 006)

5.5 Hazardous Waste Management

5.5.1 Assessment Summary

Very limited quantities of hazardous wastes are generated by operations at the DNSC-New Haven facility. These include spent paint, paint thinner and solvents, and wastes from vehicle/equipment maintenance. The facility qualifies as a Resource Conservation and Recovery Act (RCRA) Conditionally Exempt Small Quantity Generator (CESQG) of hazardous wastes (i.e., generates less than 220 pounds of hazardous waste per month).

Operations at the DNSC-New Haven Facility generate fluorescent lamps, a universal hazardous waste. Spent fluorescent lamps were observed to be stored in Building T-127.

In 2003, DNSC-New Haven generated one 55-gallon drum of lead paint chips.

5.5.2 Findings Summary

Two drums in the Old Cafeteria, T-130, were found. One drum was labeled "Lead Contaminated Clothing". The other contained empty urethane sealant tubes and PPE. The contents of these drums have not been characterized as hazardous or solid waste. (Finding 007)

Documentation of annual hazardous waste refresher training was not found in the employee files. (Finding 008)

No markings or inventory were available to demonstrate the length of time that the spent fluorescent lamps had been accumulated. (Appendix A, Photograph 4) (Finding 009)

The used lamps in Building T-127 are not being managed properly. Used lamps are stored in boxes that were not closed. (Appendix A, Photograph 4) (Finding 010)

Personnel have not been trained on the proper handling and emergency procedures for handling universal waste. (Finding 011)

5.6 Natural Resources Management

5.6.1 Assessment Summary

The Natural Resources Assessment for Defense Logistics Agency, Defense National Stockpile Center, New Haven, Indiana (USDA Forest Service, July 1998) provided no management recommendations, but presented some wildlife habitat improvement and management opportunities to enhance the prairie area of the Depot. No threatened or endangered species were identified at the DNSC-New Haven facility.

5.6.2 Findings Summary

No natural resources management findings were identified.

5.7 Other Environmental Issues

The Other Environmental Issues Protocol is comprised of seven issues: Environmental Impacts (NEPA process), environmental noise, IRP, pollution prevention, program management, waste military munitions, and environmental management systems. Each of these areas is addressed separately within this section.

5.7.1 National Environmental Policy Act Process

5.7.1.1 Assessment Summary

DNSC-New Haven is following procedures for complying with the NEPA.

5.7.1.2 Findings Summary

No environmental impact findings were identified.

5.7.2 Environmental Noise

5.7.2.1 Assessment Summary

The DNSC-New Haven facility does not operate aircraft. Heavy machinery operated by DNSC includes loaders. Truck loading/unloading also occurs at the property. All operations are performed between 7:00 am and 4:00 pm. The facility is located in an agricultural, rural, and industrial area. Noise is not considered a significant factor at this facility.

All motor vehicles with internal combustion engines that were observed in operation appeared to be equipped with mufflers that are in good working order.

5.7.2.2 Findings Summary

No environmental noise findings were identified.

5.7.3 Installation Restoration Program

5.7.3.1 Assessment Summary

The Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) contains information on hazardous waste sites, potential hazardous waste sites, and remedial activities across the nation, including sites that are on the National Priorities List (NPL) or being considered for the NPL that are regulated by the Comprehensive Emergency Response, Compensation, and Liability Act (CERCLA). The facility is not listed on the CERCLIS database.

A Preliminary Assessment (PA), conducted under the CERCLA guidance, was conducted at the site in January 1999 (Parsons, January 1999). The PA was performed to:

- Determine what hazardous substances have been or were currently stored on the site.
- Assess the immediate or potential threat that materials or wastes released from the site, if any, posed to human health and the environment.
- Assess if there was a need for further site investigation to determine the nature and extent of any potential environmental contamination.

The PA evaluated the potential for contamination through four pathways: groundwater, surface water, soil, and air, and concluded the following:

- Some of the exterior stockpiles are in direct contact with soil, but that minerals were not likely to be leaching from the piles that exceed groundwater protection standards. No groundwater targets were identified in the vicinity of the Depot.
- Contamination of stormwater was identified and sensitive receptors (wetlands) were identified on and near the Depot.
- Contamination of soil from the stockpiles and the erosion of the soils off-site were identified. Nearby receptors included site workers, nearby farmsteads, and a public park.
- Airborne deposition was suspected to occur primarily when materials were being loaded or unloaded. Contamination through the air pathway was identified as a possibility due to the presence of onsite workers and a nearby residence and public park.

The PA did not make any recommendations for further investigation or remediation.

5.7.3.2 Findings Summary

No IRP findings were identified.

5.7.4 Pollution Prevention

5.7.4.1 Assessment Summary

There are no regularly conducted industrial activities at DNSC-New Haven.

5.7.4.2 Findings Summary

No pollution prevention findings were identified.

5.7.5 Program Management

5.7.5.1 Assessment Summary

The Depot Manager (Mr. John Olszewski) and the Acting Depot Manager (Ms. Nikki Horther) are responsible for environmental issues at DNSC-New Haven. Assistance with environmental matters is provided by Mr. Rob Skruck, Environmental Specialist, DNSC-Warren.

5.7.5.2 Findings Summary

No program management findings were identified.

5.7.6 Waste Military Munitions

5.7.6.1 Assessment Summary

Waste military munitions are not generated, stored, or disposed of at the facility.

5.7.6.2 Findings Summary

No waste military munitions findings were identified.

5.7.7 Environmental Management Systems

5.7.7.1 Assessment Summary

According to Executive Order 13148, by December 31, 2005, each agency shall implement an environmental management system at all appropriate agency facilities based on facility size, complexity, and the environmental aspects of facility operations. The facility environmental management system shall include measurable environmental goals, objectives, and targets that are reviewed and updated annually. Once established, environmental management system performance measures shall be incorporated in agency facility audit protocols. All Defense National Stockpile Centers are going through the implementation of an Environmental, Safety, and Occupational Health (ESOH) Management System, as directed by DLA.

5.7.7.2 Finding Summary

The Acting Depot Manager was not aware of all of her environmental responsibilities. She was not aware of her responsibility to review the UST closure reports or to notify the Depot Manager or DNSC headquarters personnel of the reportable releases identified in the UST closure reports. In addition, no one took responsibility for involving the Environmental Specialist or other DNSC/DLA supporting personnel in the UST closures, notifying the State before or after the UST removals, or for notifying the State after reportable contamination was identified. (Finding 012)

The procedures for notifying DNSC headquarters personnel or State agencies (as documented in the ISC Plan) were not implemented when reportable contamination was identified during the UST closures. (Finding 013)

5.8 Pesticide Management

5.8.1 Assessment Summary

Pesticides or herbicides are neither stored nor mixed at the facility. Herbicides were last applied by a contractor in August 2003.

5.8.2 Findings Summary

The documentation provided to the Depot after the August 2003 herbicide application did not include a copy of the pesticide applicator certification. (Finding 014)

It should be noted that the Pesticide Management Plan (PMP) (calendar year 2003) maintained at the New Haven Depot was not the most current PMP (calendar year 2004) available from the DNSC. The most current PMP should be obtained and maintained at the New Haven Depot.

5.9 Petroleum, Oil, and Lubricant Management

5.9.1 Assessment Summary

The facility has the capacity to store approximately 6,300 gallons of oil products in seven ASTs:

- One approximately 500-gallon diesel EcoVault (double-walled) AST adjacent to building T-304 for the pump house operation
- One approximately 100-gallon diesel belly AST (associated with a backup generator) adjacent to building T-304
- One approximately 2,500-gallon diesel EcoVault AST adjacent to Building T-111 for vehicle fueling
- One approximately 2,500-gallon unleaded gasoline EcoVault AST adjacent to Building T-111 for vehicle fueling
- One approximately 100-gallon diesel belly AST (associated with a backup generator) inside Building T-111
- One approximately 500-gallon diesel EcoVault AST adjacent to building T-133 for pump house operation
- One approximately 100-gallon diesel belly AST (associated with a backup generator) adjacent to Building T-133

Since the total oil storage capacity is greater than the 1,320-gallon threshold specified in 40 CFR 112, the New Haven Depot is required to prepare and maintain a Spill Prevention Control and Countermeasures (SPCC) Plan. An SPCC Plan dated March 1999 is available for the facility.

5.9.2 Findings Summary

The SPCC Plan does not include the current inventory of ASTs located at the facility. We also recommend that, during the update, the SPCC Plan should be rewritten to include documented procedures to be followed and emergency personnel to be contacted. (Finding 015). We also note that the SPCC Plan identifies the tanks as containing No. 2 fuel oil, however the diesel EcoVault tanks are marked as "diesel."

The SPCC Plan requires that the facility perform and document monthly AST inspections. Monthly inspections are not performed or documented of the ASTs. (Finding 016)

The SPCC Plan was last certified by a registered professional engineer on 12 March 1999, which requires that the SPCC Plan was scheduled for a review and update in March 2004. (Finding 017)

Changes to the SPCC Plan for the removal of two USTs and the addition of two ASTs were not certified by a licensed PE. (Finding 018)

5.10 Solid Waste Management

5.10.1 Assessment Summary

The solid waste collection and disposal program is managed by contract.

5.10.2 Findings Summary

No findings were found associated with solid waste.

5.11 Storage Tanks Management

5.11.1 Assessment Summary

The active storage tanks located at DNSC-New Haven are detailed in Section 5.9 above. The ASTs are not required to be registered with IDEM.

Four USTs were removed from the facility in June 2003. Two of the USTs were regulated; the remaining two were not regulated. The following USTs were removed:

- 2,500-gallon gasoline UST (regulated) (T-118 area)
- 1,000-gallon diesel UST (or fuel oil*) (regulated) (T-124 area)
- 2,500-gallon fuel oil (or diesel fuel*) UST (not regulated) (T-111 area)
- 2,500-gallon fuel oil (or diesel fuel*) (not regulated) (T-216B area)

(*Available documentation from the facility indicates that the material stored was either diesel or fuel oil.)

In addition, one unregulated 1,000-gallon heating oil UST was removed from the vicinity of building T-135 in August 2000.

The fuel oil USTs were unregulated because they were used to store heating for on-site consumptive use only.

5.11.2 Findings Summary

Documentation of the UST permanent closures for the regulated tanks at Buildings T-118 and T-124 were not submitted to IDEM on the appropriate form (State Form 45223 Notification for Underground Storage Tanks) or within 30 days before tank removal. IDEM was notified that there were no longer any tanks at the facility in November 2003 when the tank fees were requested. A notation was made on the fee form that the tanks were no longer present, however this is not the method of notification required by IDEM. (Finding 019)

Further site investigation or corrective action has not begun for the UST removal area T-118 which had TPH concentrations in excavation sidewalls of over 100 ppm. (Finding 020)

The regulated tanks at Buildings T-118 and T-124 did not include bottom samples below the tanks. A minimum of two bottom soil samples must be taken within 2 feet below both ends of the USTs. (Finding 021) Concrete pads were located at the bottom of the excavation and were not removed. A waiver of the requirement for the bottom samples by IDEM may be granted if requested.

The presence of 4,800 ppm TPH in soil in the remaining east sidewall was identified in an August 2003 gasoline UST removal report (UST Closure Assessment; Area - T-118). Documentation was not found to indicate that IDEM was notified of the release; nor were facility personnel aware of a DNSC/DLA representative having contacted IDEM by telephone. Additionally, the presence of 230 ppm TPH was identified in an August 2003 diesel UST removal report (UST Closure Assessment; Area - T-124). Documentation was not found to indicate that IDEM was notified of the release; nor were facility personnel aware of a DNSC/DLA representative having contacted IDEM by telephone. (Finding 022)

The closure reports did not include the State Form 45223 Notification for Underground Storage Tanks. The closure assessments (for Area T-111 dated August 12, 2003; and Area T-124 dated August 20, 2003) were not submitted to IDEM within 30 days after the USTs were removed (in June 2003). As of the date of this ECAS report, the closure assessment reports had not been submitted to IDEM. (Finding 023)

5.12 Toxic Substances Management

5.12.1 PCBs

5.12.1.1 Assessment Summary

No PCB-containing transformers or large capacitors are located at the facility. Sample results from a May 15, 2000, report indicate all transformers are below 50 ppm. No evidence of PCB-containing equipment was observed at the facility.

5.12.1.2 Findings Summary

No PCB-related findings were identified.

5.12.2 Asbestos

5.12.2.1 Assessment Summary

DNSC-New Haven personnel maintain an inventory of ACM at the facility and have an Asbestos Management Plan in place. According to the Depot's 2003 Annual ACM Survey, ACM is located in Buildings T-111, T-118, T-124, T-133, T-136, T-141, T-146, T-147, T-211, T-212, T-213, T-214, and T-215. The materials that contain asbestos are pipe lagging, insulation, wallboard, and exterior siding.

5.12.2.2 Findings Summary

The last asbestos survey available was dated February 2001. The survey is required to be updated annually and submitted to the DNSC Environmental Office. (Finding 024) A condition assessment must be conducted by a State of Indiana licensed asbestos inspector.

5.12.3 Radon

5.12.3.1 Assessment Summary

A radon survey was not found at the facility. Allen County is located in EPA Radon Zone 1. The zone designation reflects the average short-term radon measurement that can be expected to be measured in a building without the implementation of radon control methods. Zone 1 is considered to have a high potential with average concentrations greater than 4 picoCuries per liter (pCi/L).

DoD policy is to ensure that any available and relevant radon assessment data pertaining to Base Realignment and Closure (BRAC) property being transferred be included in property transfer documents. DoD policy is not to perform radon assessment and mitigation prior to transfer of BRAC property unless otherwise required by applicable law.

5.12.3.2 Findings Summary

No radon-related findings were identified.

5.12.4 Lead-Based Paint

5.12.4.1 Assessment Summary

DoD policy with regard to lead-based paint (LBP) is to manage in a manner protective of human health and the environment, and to comply with all applicable federal, State, and local laws and

regulations governing hazards. The federal requirements apply to residential structures and dwellings.

A lead-based paint survey was not found at the facility.

5.12.4.2 Findings Summary

No residential structures are located at the DNSC-New Haven facility. No lead-based paint findings were identified.

5.13 Wastewater Management

5.13.1 Assessment Summary

Wastewater from washroom facilities and the kitchen is discharged to a municipal wastewater collection and treatment system. These wastewaters are limited to sanitary wastes only.

The facility is not required to have a storm water permit according to State or federal regulations because it's Standard Industrial Classification (SIC) code (9199) is not one of the regulated industrial codes. However, a Storm Water Pollution Prevention Plan (SWPPP) dated September 1996 was available for the facility, but does not reflect the current facility storage. A draft Storm Water Pollution Prevention Plan (January 2004) was also available at the facility, and is expected to be implemented upon finalization.

Storm water on the depot property discharges from the property through several ditches and outfalls. Exposed materials at the facility include ferrochrome and ferromanganese.

5.13.2 Findings Summary

A draft SWPPP (January 2004) has been prepared for the facility, although one is not required by State or federal regulations, but does not meet all the Indiana requirements for a SWPPP for a permitted facility. (Finding 025) The Indiana citation (327 IAC 15-6-7) provides the requirements for a SWPPP for a permitted facility in the State of Indiana. The State of Indiana has been authorized to implement the federal stormwater permit program, and since the DNSC's policy is to voluntarily participate in the stormwater planning process, it is suggested that the Indiana regulations be considered when developing the SWPPP for the New Haven facility. A comparison of the draft SWPPP (January 2004) to the Indiana SWPPP requirements is included as Appendix B.

5.14 Water Quality Management

5.14.1 Assessment Summary

Potable water is supplied by the City of New Haven. Water for the fire water reservoirs is provided by three onsite wells (one for each reservoir). The fire water is not used for potable water.

5.14.2 Findings Summary

No findings were identified regarding water supplies.

6 FINDINGS SHEETS

This Section presents all regulatory and management findings observed during the ECAS audit at the DNSC-New Haven facility. These include Class I, II, III, Positive, and H&S findings, as defined in Section 1.

Although the ECAS Audit finding sheets are generally self explanatory, there are several items that warrant further explanation, which are discussed below:

- **Protocol Area:** Refers to the 13 compliance protocols identified in Section 2.1 and the TEAM Guide (USACERL, September 2003).
- Manual: Document used to determine the compliance with regulations, policies, or guidance. As stated in Section 2.1, the following references were used in the assessment: TEAM Guide, Indiana TEAM Guide Supplement, and Indiana Regulations.
- Ranking: As explained above, the ranking (class) category is based on the nature and extent of noncompliance. Each classification is discussed in detail in Section 1.
- Conditions: Description of finding.
- Criteria: Description of regulatory, policy, or guidance requirement.
- Regulatory Citation: Regulatory or policy citation, or MP when no regulation exists.
- Finding Status: A finding status is identified as "open" if a finding can be resolved or corrected. Findings are "closed" if the finding was resolved or corrected prior to the issuance of this final Report.

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: Not applicable (N/A)	
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Materials Management Question Number: HM.1.4.US.	Revision Date: September 2003 Revision Date: N/A	
Ranking: H&S Regulatory Agency: OSHA Regulatory Agency Level: Federal	Finding Status: Closed	
Conditions: In Warehouse T-213, Section 1, several cont Containers of hazardous materials must not be leaking.	ainers of hazardous materials were corroded and leaking.	
Criteria: Specific housekeeping requirements must be me	et in areas where hazardous materials are stored.	
Regulatory Citation: 29 CFR 1910.176(c)		
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A	
Corrective Actions Proposed Corrective Action: Remove the containers from the containers properly.	m the Warehouse, determine their contents, and dispose of	
Corrective Actions Taken: The containers were disposed of properly through Safety-Kleen. A copy of the manifest was provided by Ms. Horther.		
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 - \$500 Actual Corrective Action Cost:	Completed Date Review Completed:	
Audit Team Comments: None		
Audit Team: Lazarus/Rider		
Audit Date: 5-6 February 2004		
Assessment Date: 27 February 2004	Finding Number: 001	

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Materials Management Question Number: HM.1.3.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: H&S Regulatory Agency: OSHA Regulatory Agency Level: Federal	Finding Status: Closed
	ss 1-gallon container with a yellowish clear liquid was not aining approximately 2 inches of an unknown material was
Criteria: Containers of hazardous chemicals in the work specific information.	place are required to be labeled, tagged or marked with
Regulatory Citation: 29 CFR 1910.1200	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Ensure all containers are p employees and contractors are aware of the requirement to	
Corrective Actions Taken: The containers were dispose manifest was provided by Ms. Horther.	ed of properly through Safety-Kleen. A copy of the
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date
	Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 002

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Materials Management Question Number: HM.10.2.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: POS Regulatory Agency: OSHA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: Documentation that all employees and cont was not found in the employee files.	ractors have received hazardous communication training
Criteria: Personnel working with hazardous materials a hazards of such materials.	re required to be trained in their use and the potential
Regulatory Citation: 29 CFR 1910.1200(b)(3)(iii), 191	0.1200(b)(4)(iii), 1910.1200(b)(6), and 1910.1200(h)
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Ensure all employees and training and have it documented.	l contractors have received hazardous communication
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date Review Completed:
Audit Team Comments: Internal training resources ca	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	4
Assessment Date: 27 February 2004	Finding Number: 00

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Materials Management Question Number: HM.35.4.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: H&S Regulatory Agency: OSHA Regulatory Agency Level: Federal	Finding Status: Open
which were labeled as flammable materials, were stored	oximately 20 one gallon containers of Zinc Oxide Paint, in a wooden locker. The wooden locker did not meet the and was not labeled as "Flammable Materials". According ong to be disposed of properly.
Criteria: Storage cabinets used for the storage of flams	mable/combustible liquids must meet specific requirements.
Regulatory Citation: 29 CFR 1910.106(d)(3)	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Move the containers of are disposed of properly.	Zinc Oxide Paint into a flammable storage cabinet until they
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date Review Completed:
Audit Team Comments:	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 004

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Materials Management Question Number: HM.35.6.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: H&S Regulatory Agency: OSHA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: In the Building T-111 Motor Pool, flammal stored on a shelf and two aerosol paint cans were stored requirements for flammable/combustible materials storage cabinets immediately upon identification of the condition	in a metal cabinet. The shelf does not meet the ge. These containers were placed in the appropriate
In Warehouse T-214, Section 4, three containers of vinyl table. The table does not meet the requirements for flam	cement, a flammable material, were stored on a wooden mable/combustible materials storage.
In Building T-127, an aerosol can of high visibility fluore the requirements for flammable/combustible materials ste	escent paint was stored on a shelf. The shelf does not meet orage.
Criteria: Flammable/combustible storage rooms inside	of buildings must meet certain specifications

Regulatory Citation:	29 CFR 1910.106(d)(4)	

Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions	

Proposed Corrective Action:	Move the flammable materials into a flammable	e storage locker.
Stort De	nte.	Camulata 4 D.4

Start Date	Completed Date
Planned Info.:	
Actual Info.:	

Estimated Corrective Action Cost: \$0	
Actual Corrective Action Cost:	

Actual Corrective Action Cost:	
	Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	

Assessment Date: 27 February 2004

Finding Number: 005

Facility Location: DNSC-New Haven Tenant: N/A Facility Activity: Facility Operations Manual: TEAM Guide Revision Date: August 2003 Local Manual: N/A Revision Date: N/A Protocol Area: Hazardous Materials Management Question Number: HM.40.2.US. Ranking: H&S Finding Status: Open Regulatory Agency: OSHA Regulatory Agency Level: Federal Conditions: In Warehouse T-215, Section 2, hazardous materials containers of hydraulic oil and Spinesstic, combustible materials, were left open. Criteria: Incidental storage of flammable/ combustible liquids in industrial areas must conform to certain requirements. (Containers of flammable/combustible materials must be kept closed when not in use.) Regulatory Citation: 29 CFR 1910.106(e)(2) Previous Notice: N/A Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A **Corrective Actions** Proposed Corrective Action: Close containers of flammable/combustible materials when not in use. Start Date Completed Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost: Review Completed: Audit Team Comments: None Audit Team: Lazarus/Rider Audit Date: 3-4 February 2004 Assessment Date: 27 February 2004 Finding Number: 006

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A	
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Waste Management Question Number: HW.10.1.US.	Revision Date: September 2003 Revision Date: N/A	
Ranking: II Regulatory Agency: Environmental Protection Agency (EPA)/IDEM Regulatory Agency Level: Federal/State	Finding Status: Closed	
Conditions: Two drums in the Old Cafeteria, T-130, were found. One drum was labeled "Lead Contaminated Clothing". The other contained empty urethane sealant tubes and PPE. The contents of these drums have not been characterized as hazardous or non-hazardous solid waste.		
Criteria: Generators of solid waste must determine if the	wastes are hazardous wastes.	
Regulatory Citation: 40 CFR 261.3, 261.4(b), 261.21 th	rough 261.24, and 262.11	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A	
Corrective Actions Proposed Corrective Action: Determine if the waste in the drums is hazardous waste or solid waste and dispose of the waste accordingly.		
Corrective Actions Taken: The drums were disposed of properly through Safety-Kleen. A copy of the manifest was provided by Ms. Horther.		
Start Date Completed Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 - \$500 Actual Corrective Action Cost:		
Review Completed:		
Audit Team Comments: None		
Audit Team: Lazarus/Rider		
Audit Date: 3-4 February 2004		
Assessment Date: 27 February 2004	Finding Number: 007	

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Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Waste Management Question Number: HW.15.2.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: III Regulatory Agency: EPA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: Documentation of annual hazardous waste re	efresher training was not found in the employee files.
Criteria: CESQG personnel who handle hazardous waste should meet certain training requirements.	
Verify that an annual review of initial training is provided.	
Regulatory Citation: Management Practice	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Ensure all employees and contractors who handle hazardous waste are trained and the training is documented. The training can be performed by internal DNSC personnel and resources.	
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date
Review Completed:	
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 008

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Waste Management Question Number: HW.280.2,US.	Revision Date: September 2003 Revision Date: N/A
Ranking: I Regulatory Agency: EPA/IDEM Regulatory Agency Level: Federal	Finding Status: Open
Conditions: No markings or inventory were available lamps had been accumulated.	to demonstrate the length of time that the spent fluorescent
Criteria: Small quantity handlers of universal waste a	re required to meet specific accumulation time limits.
Verify that universal waste is not accumulated for more generated, or received from another handler.	e than 1 year from the date that the universal waste is
Regulatory Citation: 40 CFR 273.15	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Date the container of use	sed lamps when the first lamp was placed in the container.
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date
Audit Team Comments:	Review Completed:
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 009

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Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Waste Management Question Number: HW.290.6.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: I Regulatory Agency: EPA/IDEM Regulatory Agency Level: Federal/State	Finding Status: Open
Conditions: The used lamps in Building T-127, are not that were not closed.	ot being managed properly. Used lamps are stored in boxes
Criteria: Small quantity handlers of universal waste a specific parameters.	ire required to manage universal waste lamps according to
Regulatory Citation: 40 CFR 273.13(d)	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Ensure the containers of	of used lamps are kept closed when not adding lamps.
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 010

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Hazardous Waste Management Question Number: HW.300.1.US.	Revision Date: September 2003 Revision Date:
Ranking: I Regulatory Agency: EPA/IDEM Regulatory Agency Level: Federal/State	Finding Status: Open
Conditions: Personnel have not been trained on the propouniversal waste.	er handling and emergency procedures for handling
Criteria: Employees who handle or have responsibility for managing universal wastes are required to be trained.	
Regulatory Citation: 40 CFR 273.16	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Train all employees and contractors who handle or have responsibility for managing universal wastes and ensure the training is documented.	
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 - \$1,000 Actual Corrective Action Cost:	Completed Date
Review Completed:	
Audit Team Comments: Training can be conducted with	DNSC/DLA internal resources to minimize costs.
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 011

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Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Other Environmental Issues Question Number: O7.30.1.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: III Regulatory Agency: DNSC/DLA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: The Acting Depot Manager was not aware of aware of her responsibility to review the UST closure reportsonnel of the reportable releases identified in the UST of the reportable releases identified in the use of the reporta	orts or to notify the Depot Manager or DNSC headquarters
In addition, no one took responsibility for involving the Enpersonnel in the UST closures, notifying the State before of reportable contamination was identified.	
Criteria: Facility personnel should be made aware of the	ir environmental responsibilities.
Regulatory Citation: Management Practice	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Ensure that Depot personn procedures, and responsibilities.	el are familiar with the appropriate environmental plans,
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	ŕ
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 012

Facility Location: DNSC-New Haven Tenant: N/A Facility Activity: Facility Operations Manual: TEAM Guide Revision Date: September 2003 Local Manual: N/A Revision Date: N/A Protocol Area: Other Environmental Issues Question Number: O7.30.3.US. Ranking: III Finding Status: Open Regulatory Agency: DNSC/DLA Regulatory Agency Level: Federal Conditions: The procedures for notifying DNSC headquarters personnel or State agencies (as documented in the ISC Plan) were not implemented when reportable contamination was identified during the UST closures. Criteria: The facility/organization should have, and implement, internal and external communication processes on environmental management issues. Regulatory Citation: Management Practice Repeat Finding: No Previous Notice: N/A Reference Previous Finding: N/A Reference Previous NOV: N/A **Corrective Actions** Proposed Corrective Action: Ensure that Depot personnel are familiar with the appropriate environmental plans, procedures, and responsibilities. Start Date Completed Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost: Review Completed: Audit Team Comments: None

Audit Date: 3-4 February 2004

Assessment Date: 27 February 2004

Finding Number: 013

Facility Location: DNSC-New Haven Facility Activity: Pesticide Management	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Pesticide Management Question Number: N/A	Revision Date: September 2003 Revision Date: N/A
Ranking: III Regulatory Agency: DNSC/DLA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: The documentation provided to the Depo copy of the pesticide applicator certification.	t after the August 2003 herbicide application did not include a
contractors on their sites. They will also be responsible Management Report, DD Form 1532 covering any pest personnel is completed. [] They are to be signed in its completed.	
Regulatory Citation: Pest Management Plan, Calenda	ar Year (CY) 2003, H(4)(a)
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Obtain applicator certif	ications for the August 2003 pesticide application.
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date
	Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 5-6 February 2004	
Assessment Date: 27 February 2004	Finding Number: 014

Facility Location: DNSC-New Haven Facility Activity: POL Management	Tenant: N/A	
Manual: TEAM Guide Local Manual: N/A Protocol Area: POL Management Question Number: PO.5.2.US.	Revision Date: September 2003 Revision Date: N/A	
Ranking: I Regulatory Agency: EPA Regulatory Agency Level: Federal	Finding Status: Open	
Conditions: The SPCC Plan does not include the current recommend that, if the Plan is intended for implementation rewritten to include documented procedures to be follower.	n in the event of a release, the SPCC Plan be reviewed and	
Criteria: The SPCC plan is required to contain specific information.		
Regulatory Citation: 40 CFR 112.1(b), 112.1(d), and 112.7(a), 112.7(b), 112.7(d), and 112.7(j)		
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A	
Corrective Actions Proposed Corrective Action: Revise the SPCC Plan to include all components required by 40 CFR §112.7 for an SPCC Plan and to include all ASTs at the Depot. The revised SPCC Plan must be signed by a registered professional engineer.		
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$1000 - \$4000 Actual Corrective Action Cost: Review Completed:		
Audit Team Comments: We also note that the SPCC Plan identifies the tanks as containing No. 2 fuel oil, however the tanks are marked as "diesel."		
Audit Team: Lazarus/Rider		
Audit Date: 4-6 February 2004		
Assessment Date: 27 February 2004	Finding Number: 015	

Facility Location: DNSC-New Haven Facility Activity: POL Management	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: POL Management Question Number: PO.5.2.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: I Regulatory Agency: EPA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: The SPCC Plan requires that the facility per inspections are not performed or documented of the seven	
Criteria: The SPCC plan is required to contain specific in	nformation.
record of the inspections and tests, signed by the appropria	the facility. You must keep these written procedures and a
Regulatory Citation: 40 CFR 112.7(e)	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Conduct monthly inspection set forth in the SPCC Plan. Keep records of the inspection	
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$0 Actual Corrective Action Cost:	Completed Date
	Review Completed:
Audit Team Comments: N/A	
Audit Team: Lazarus/Rider	
Audit Date: 5-6 February 2004	
Assessment Date: 27 February 2004	Finding Number: 016

Facility Location: DNSC-New Haven	T	
Facility Activity: POL Management	Tenant: N/A	
Manual: TEAM Guide Local Manual: N/A Protocol Area: POL Management	Revision Date: September 2003 Revision Date: N/A	
Question Number: PO.5.3.US.		
Ranking: I Regulatory Agency: EPA Regulatory Agency Level: Federal	Finding Status: Open	
Conditions: The SPCC Plan was last certified by a regist requires that the SPCC Plan was scheduled for a review and scheduled for		
Criteria: Each SPCC plan must be reviewed at least once every 5 years.		
Regulatory Citation: 40 CFR 112.1(b), 112.1(d), and 112.5(b)		
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A	
Corrective Actions Proposed Corrective Action: Revise the SPCC Plan to include all components required by 40 CFR §112.7 for an SPCC Plan and to include all ASTs at the Depot. The revised SPCC Plan must be signed by a registered professional engineer.		
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$1,000 - \$5,000	Completed Date	
Actual Corrective Action Cost: \$1,000 \$45,000		
Review Completed:		
Audit Team Comments: None		
Audit Team: Lazarus/Rider		
Audit Date: 5-6 February 2004		
Assessment Date: 27 February 2004	Finding Number: 017	
	Manage 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	

Facility Location: DNSC-New Haven Facility Activity: POL Management	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: POL Management Question Number: PO.5.5.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: I Regulatory Agency: EPA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: Changes to the SPCC Plan for the removal of certified by a licensed PE.	f two USTs and the addition of two ASTs were not
Criteria: A registered professional engineer must certify each amendment must be prepared according to sound eng	
Regulatory Citation: 40 CFR 112.1(b), 112.1(d), 112.3(d)	d)
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Revise the SPCC Plan to it SPCC Plan and to include all ASTs at the Depot. The revi	
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$1,000 - \$5,000 Actual Corrective Action Cost:	Completed Date Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 5-6 February 2004	
Assessment Date: 27 February 2004	Finding Number: 018

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A	
Manual: Indiana Guide Local Manual: N/A Protocol Area: Storage Tank Management Question Number: ST.30.2.IN.	Revision Date: July 2003 Revision Date: N/A	
Ranking: I Regulatory Agency: IDEM Regulatory Agency Level: State	Finding Status: Open	
Conditions: Documentation of the UST permanent closures for the regulated tanks at Buildings T-118 and T-124 were not submitted to IDEM on the appropriate form (State Form 45223 Notification for Underground Storage Tanks) or within 30 days before tank removal.		
Criteria: Owners/operators of UST systems must meet specific notification requirements (329 IAC 9-2-2(a) through (h)).		
329 IAC 9-2-2(g) All owners and operators of UST systems who: (1) temporarily close a tank system under 329 IAC 9-6-5; or (2) permanently close or perform a change-in-service on a tank system under 329 IAC 9-6-1; shall, within thirty (30) days of completing such action, submit notice of this action to the agency as required by subsection (a).		
329 IAC 9-6-1(a) At least thirty (30) days before beginning either permanent closure or a change-in-service, the owner and operator shall notify the agency of their intent to permanently close or make the change-in-service unless such action is in response to corrective action. The required assessment of the excavation zone under section 2 of this rule must be performed:		
(1) after notifying the agency; and(2) before completion of the permanent closure or change-in-service.		
Regulatory Citation: 329 IAC 9-2-2(g) and 329 IAC 9-6-1(a)		
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A	
Corrective Actions Proposed Corrective Action: Notify IDEM of the removal of the two regulated USTs T-118 and T-124 on State Form 45223.		
Start Date	Completed Date	
Planned Info.:		
Actual Info.: Estimated Corrective Action Cost: \$0		
Actual Corrective Action Cost:	Review Completed:	

Audit Team: Lazarus/Rider

Assessment Date: 27 February 2004

however, this is not method of notification required by IDEM.

Audit Team Comments: IDEM was notified that there were no longer any tanks at the facility in November 2003 when the tank fees were requested. A notation was made on the fee form that the tanks were no longer present,

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: Indiana Guide Local Manual: N/A Protocol Area: Storage Tank Management Question Number: ST.2.1.IN.	Revision Date: July 2003 Revision Date: N/A
Ranking: I Regulatory Agency: IDEM Regulatory Agency Level: State	Finding Status: Open
Conditions: Further site investigation or corrective action had TPH concentrations in excavation sidewalls of over 10	
Criteria: Federal facilities are required to comply with al the checklist (a finding under this checklist item will have findings). 329 IAC 9-6-2 (c) The owner and operator shall begin site any of the following is discovered: (1) Contaminated soils that: (A) have one (1) or more COC that is detected in an a (i) one hundred (100) parts per million total petroles.	the citation of the applied regulation as a basis of investigation and corrective action under 329 IAC 9-5 if mount greater than or equal to:
Regulatory Citation: 329 IAC 9-6-2(c)	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: Further site investigation a UST removal area T-118 following IDEM notification.	and corrective action is required by 329 IAC 9-5 for the
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$5,000 - \$10,000 Actual Corrective Action Cost:	Completed Date Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 020

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A	
Manual: Indiana Guide Local Manual: N/A Protocol Area: Storage Tank Management Question Number: ST.2.1.IN.	Revision Date: July 2003 Revision Date: N/A	
Ranking: I Regulatory Agency: IDEM Regulatory Agency Level: State	Finding Status: Open	
Conditions: The regulated tanks at Buildings T-118 and T-124 did not include bottom samples below the tanks. A minimum of two bottom soil samples must be taken within 2 feet below both ends of the underground storage tank.		
Criteria: Federal facilities are required to comply with all applicable state regulatory requirements not contained in the checklist (a finding under this checklist item will have the citation of the applied regulation as a basis of findings).		
329 IAC 9-6-2(f) Closure sampling requirements must be completed as follows: (1) Each underground storage tank excavation must be sampled separately. Composite samples are not acceptable for closure. The samples must meet the following requirements: (A) All samples must be discrete grab samples taken directly from the undisturbed native soil in bottom and sidewall samples. The following requirements apply to samples: (i) Bottom samples must meet the following requirements: (AA) Soil sampling and analysis must consist of a minimum of two (2) bottom soil samples taken within two (2) feet below both ends of each underground storage tank. (BB) If the underground storage tank capacity is greater than ten thousand (10,000) gallons, one (1) additional sample and analysis must be taken within two (2) feet below the middle of the underground storage tank.		
Regulatory Citation: 329 IAC 9-6-2(f)		
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A	
Corrective Actions Proposed Corrective Action: The concrete pads must be excavated so that two bottom samples from the bottom of the excavation for the UST removal areas T-118 and T-124 can be collected. Alternatively, a waiver from IDEM may be requested.		
Start Date	Completed Date	
Planned Info.: Actual Info.:		
Estimated Corrective Action Cost: \$1,000 - \$10,000		
Actual Corrective Action Cost:	P	
Audit Team Comments: None	Review Completed:	
Audit Team: Lazarus/Rider		
Audit Date: 3-4 February 2004		
Assessment Date: 27 February 2004	Finding Number: 021	

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: Indiana Guide Local Manual: N/A Protocol Area: Storage Tank Management Question Number: ST.2.1.IN.	Revision Date: July 2003 Revision Date: N/A
Ranking: I Regulatory Agency: IDEM Regulatory Agency Level: State	Finding Status: Open
	n total petroleum hydrocarbons (TPH) in soil in the remaining

Conditions: The presence of 4,800 parts per million total petroleum hydrocarbons (TPH) in soil in the remaining east sidewall was identified in an August 2003 gasoline UST removal report ("UST Closure Assessment; Area – T-118"). Documentation was not found to indicate that IDEM was notified of the release; nor were facility personnel aware of a DNSC/DLA representative having contacted IDEM by telephone. Additionally, The presence of 230 ppm TPH was identified in an August 2003 diesel UST removal report (UST Closure Assessment; Area – T-124). Documentation was not found to indicate that IDEM was notified of the release; nor were facility personnel aware of a DNSC/DLA representative having contacted IDEM by telephone.

Criteria: Federal facilities are required to comply with all applicable state regulatory requirements not contained in the checklist (a finding under this checklist item will have the citation of the applied regulation as a basis of findings).

329 IAC 9-6-2(h)(3) The owner and operator shall contact the agency within twenty-four (24) hours to obtain a LUST incident number if one (1) or more COC in the excavated native soil or backfill analyzes at greater than or equal to the detection limit listed in the table at subsection (g)(1)(A). [20 ppm]

Regulatory Citation: 329 IAC 9-6-2(h)(3)	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
	ed of the presence of contaminated soil at T-118 and T-124. A nvestigative and/or corrective actions may be required by
Start Date	Completed Date
Planned Info.:	
Actual Info.:	•
Estimated Corrective Action Cost: \$0 - \$50,000	
Actual Corrective Action Cost:	
	Review Completed:
Audit Team Comments: None	
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A	
Manual: Indiana Guide Local Manual: N/A Protocol Area: Storage Tank Management Question Number: ST.2.1.IN.	Revision Date: July 2003 Revision Date: N/A	
Ranking: I Regulatory Agency: IDEM Regulatory Agency Level: State	Finding Status: Open	

Conditions: The closure reports (for Area T-118 dated August 12, 2003; and Area T-124 dated August 20, 2003) did not include the State Form 45223 Notification for Underground Storage Tanks. In addition, the closure reports were not submitted to IDEM within 30 days after the USTs were removed (in June 2003). As of the date of this ECAS report, the closure assessments have not been submitted to IDEM.

Criteria: Federal facilities are required to comply with all applicable state regulatory requirements not contained in the checklist (a finding under this checklist item will have the citation of the applied regulation as a basis of findings).

329 IAC 9-6-2(i) Closure report requirements must be completed as follows:

- (1) A completed closure report must consist of the following:
 - (A) The underground storage tank notification form provided by the agency under 329 IAC 9-2-2.
 - (B) The underground storage tank closure report form provided by the agency.
- (2) A completed closure report must be submitted to the agency within thirty (30) days after the regulated underground storage tank is removed from the ground or closed in place.

Regulatory Citation: 329 IAC 9-6-2(i)	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: The closure reports for T-45223.	118 and T-124 should be revised to include the State Form
Start Date	Completed Date
Planned Info.:	
Actual Info.:	
Estimated Corrective Action Cost: \$0 - \$12,000	
Actual Corrective Action Cost:	
	Review Completed:
Audit Team Comments: We recommend that the IDEM checklist, be reviewed by DNSC and the contractor who re http://www.in.gov/idem/land/ust/notreportclosurereq.pdf .	UST Guidance Manual, which has a closure report review evises the reports. The manual can be found at
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 023

Facility Location: DNSC-New Haven Facility Activity: Facility Operations	Tenant: N/A
Manual: TEAM Guide Local Manual: N/A Protocol Area: Toxic Substances Management Question Number: T2.2.2.US.	Revision Date: September 2003 Revision Date: N/A
Ranking: III Regulatory Agency: EPA Regulatory Agency Level: Federal	Finding Status: Open
Conditions: The last asbestos survey available was date survey and submit it to the DNSC Environmental Office	ed February 2001. DNSC-New Haven must update their
Criteria: Risk management techniques should be prom	oted in environmental efforts.
DNSC Asbestos Policy, March 7, 2000: All DNSC facil existence of ACM, its condition, and potential for damage Environmental Office by the 15th of January each year.	
Regulatory Citation: Management Practice	
Repeat Finding: No Reference Previous Finding: N/A Reference Previous NOV: N/A	Previous Notice: N/A
Corrective Actions Proposed Corrective Action: DNSC-New Haven must DNSC Environmental Office.	update their annual asbestos survey and submit it to the
Start Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$500 - \$2,000 Actual Corrective Action Cost:	Completed Date
Actual Concerve Action Cost.	Review Completed:
Audit Team Comments: The annual asbestos survey n State of Indiana.	nust be performed by an asbestos inspector licensed by the
Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 27 February 2004	Finding Number: 024

FINDING SHEET - DNSC- NEW HAVEN

Facility Location: DNSC-New Haven Tenant: N/A Facility Activity: Wastewater Management Manual: TEAM Guide Revision Date: September 2003 Local Manual: N/A Revision Date: N/A Protocol Area: Wastewater Management **Question Number: WA.2.3.US.** Ranking: III Finding Status: Open Regulatory Agency: DNSC Regulatory Agency Level: None Conditions: A draft SWPPP has been prepared for the facility, but does not meet all the Indiana requirements for a SWPPP for a permitted facility. **Criteria:** Facilities should go above and beyond statutory and regulatory compliance. Regulatory Citation: Management Practice Repeat Finding: No Previous Notice: N/A Reference Previous Finding: N/A Reference Previous NOV: N/A **Corrective Actions** Proposed Corrective Action: Incorporate the Indiana SWPPP requirements in the final revised SWPPP. Start Date Completed Date Planned Info.: Actual Info.: Estimated Corrective Action Cost: \$1,000 - \$5,000 Actual Corrective Action Cost: Review Completed: Audit Team Comments: The Indiana stormwater citation (327 IAC 15-6-7, General requirements for a storm water pollution prevention plan (SWP3)) provides the requirements for a SWPPP for a permitted facility in the State of Indiana. The State of Indiana has been authorized to implement the federal stormwater permit program, and since the DNSC's policy is to voluntarily participate in the stormwater planning process, we suggest that the Indiana

regulations be considered when developing the SWPPP for the New Haven facility.

Audit Team: Lazarus/Rider	
Audit Date: 3-4 February 2004	
Assessment Date: 20 February 2004	Finding Number: 025

7 REFERENCES

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APPENDIX A PHOTOGRAPHS

APPENDIX A PHOTOGRAPHS CONTENTS

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Photo 4.	Universal Waste Lamp Storage in Building T-127	F

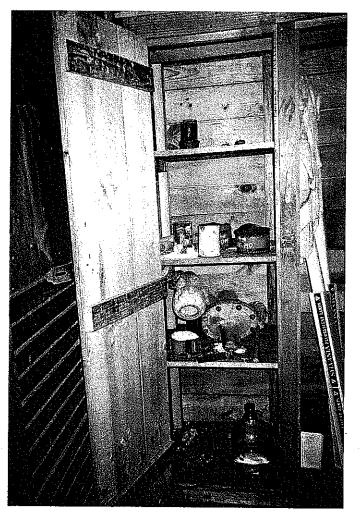


Photo 1. Corroding Containers in Wooden Cabinet in Warehouse T-213, Section 1

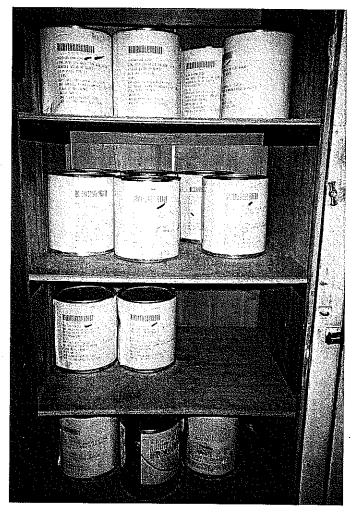


Photo 2. Flammable Materials Stored in a Wooden Locker in Building T-111

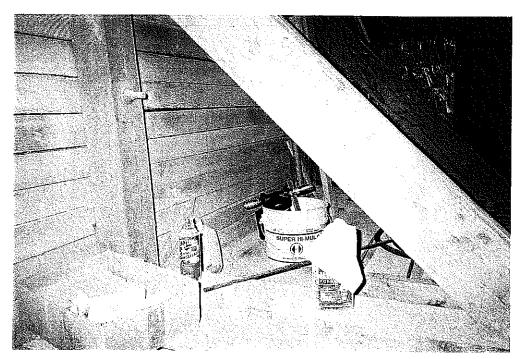


Photo 3. Open Containers in Warehouse T-215, Section 2

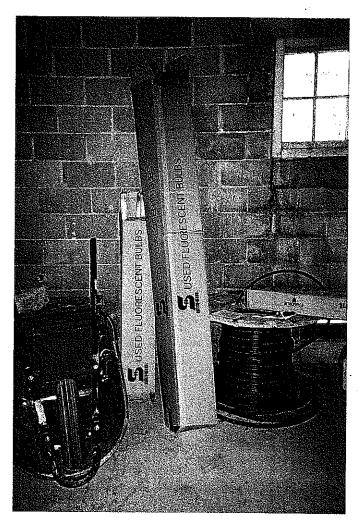


Photo 4. Universal Waste Lamp Storage in Building T-127

APPENDIX B COMPARISON OF DRAFT SWPPP (JANUARY 2004) TO INDIANA SWPPP REQUIREMENTS

APPENDIX B

Comparison of Draft SWPPP (January 2004) to Indiana SWPPP Requirements

SWPPP Requirement	Present in Draft SWPPP (January 2004)
Note: This was not intended to be an exhaustive and detailed comparison. The comparison was performed only to determine ge the January 2004 SWPPP to the Indiana regulations and to provide general guidance for improvements to the SWPPP if it is int State regulations.	neral conformance of
327 IAC 15-6-7 General requirements for a storm water pollution prevention plan (SWP3) Sec. 7. (a) The person having financial responsibility or operational control for a facility regulated under this rule shall develop implement, update, and maintain a SWP3 that:	
(1) identifies potential sources of pollution which may reasonably be expected to affect the quality of storm water discharges exposed to industrial activity from the facility;	Yes
(2) describes practices and measures to be used in reducing the potential for pollutants to be exposed to storm water;	Yes
(3) assures compliance with the terms and conditions of this rule;	N/A
(4) lists, by position title, the member or members of a facility storm water pollution prevention team, who will be responsible for developing the storm water pollution prevention plan and assisting the facility or plant manager in its implementation, maintenance, and revision; and	Yes
(5) clearly identifies the responsibilities of each storm water pollution prevention team member.	Yes
(b) The SWP3 must include a map and description of all areas of the facility that generate storm water discharges exposed to industrial activity and have a reasonable potential for storm water to be exposed to pollutants. As a minimum, the plan shall contain the following:	
(1) A copy of the complete NOI [Notice of Intent] letter.	N/A
(2) A soils map indicating the types of soils found on the facility property and showing the boundaries of the facility property outlined in a contrasting color. If a facility's property only has impervious surfaces, the soils map requirement can be omitted.	No
(3) A graphical representation, such as aerial photographs or site layout maps, drawn to an appropriate scale, which contains a legend and compass coordinates, indicating, at a minimum, the following:	
(A) All on-site storm water drainage and discharge conveyances, which may include pipes, ditches, swales, and erosion channels, related to a storm water discharge.	No (Maps do not show drainage ditches)
(B) Known adjacent property drainage and discharge conveyances, if directly associated with run-off from the facility.	No (Does not show current drainage from adjacent facility to the north through the DNSC facility property)
(C) All on-site and known adjacent property waterbodies, including wetlands and springs.	Yes
(D) An outline of the drainage area for each storm water outfall.	No

SWPPP Requirement	Present in Draft SWPPP
	(January 2004)
(E) An outline of the facility property indicating directional flows, via arrows, of surface drainage patterns.	Yes
(F) An outline of impervious surfaces, which includes pavement and buildings, and an estimate of the impervious and pervious surface square footage for each drainage area placed in a map legend.	No
(G) On-site injection wells, as applicable.	N/A
(H) On-site wells used as potable water sources, as applicable.	N/A
(I) All existing structural control measures to reduce pollutants in storm water run-off.	N/A
(J) All existing and historical underground or aboveground storage tank locations, as applicable.	No
(K) All permanently designated plowed or dumped snow storage locations.	No (if appropriate)
(L) All loading and unloading areas for solid and liquid bulk materials.	No
(M) All existing and historical outdoor storage areas for raw materials, intermediary products, final products, and waste materials.	No
	(Map does show outdoor waste storage areas)
(N) All existing or historical outdoor storage areas for fuels, processing equipment, and other containerized materials, for example, in drums and totes.	No
(O) Outdoor processing areas.	N/A
(P) Dust or particulate generating process areas.	No (If commodities are stored outside and moved, dust may be
	generated)
(Q) Outdoor waste storage or disposal areas.	No
(R) Pesticide or herbicide application areas.	N/A
(S) Vehicular access roads.	No
The on-site mapping of items listed in clauses (J) through (S) is required only in those areas that generate storm water discharges exposed to industrial activity and have a reasonable potential for storm water exposure to pollutants. The mapping of historical locations is only required if the historical locations have a reasonable potential for storm water exposure to historical pollutants. (4) An area map that indicates:	
(A) the topographic relief or similar elevations to determine surface drainage patterns;	Yes
(B) the facility boundaries outlined in a contrasting color;	No
(C) all receiving waters; and	Yes
(D) all known drinking water wells; and includes, at a minimum, the features in clauses (A), (C), and (D) within a one-fourth (1/4) mile radius beyond the property boundaries of the facility. This map must be to scale and include legend and compass coordinates.	N/A
(5) A narrative description of areas that generate storm water discharges exposed to industrial activity and have a reasonable potential for storm water exposure to pollutants, including descriptions for any existing or historical areas listed in subdivision (3)(J) through (3)(S), and any other areas thought to generate storm water discharges exposed to industrial activity and be a reasonable	

SWPPP. Requirement	Present in Draft SWPPP (January 2004)
potential source of storm water exposure to pollutants. The narrative descriptions for each identified area must include the following:	
(A) Type and typical quantity of materials present in the area.	Yes
(B) Methods of storage, including presence of any secondary containment measures.	Yes
(C) Any remedial actions undertaken in the area to eliminate pollutant sources or exposure of storm water to those sources. If a corrective action plan was developed, the type of remedial action and plan date shall be referenced.	No (We understand that a project to direct all stormwater to an onsite pond is anticipated for construction in the spring of 2004)
(D) Any significant release or spill history dating back a period of three (3) years from the date of the initial NOI letter, in the identified area, for materials spilled outside of secondary containment structures and impervious surfaces in excess of their reportable quantity, including the following: (i) The date and type of material released or spilled. (ii) The estimated volume released or spilled. (iii) A description of the remedial actions undertaken, including disposal or treatment. Depending on the adequacy or completeness of the remedial actions, the spill history shall be used to determine additional pollutant sources that may be exposed to storm water. In subsequent permit terms, the history shall date back for a period of five (5) years from the date of the NOI letter.	No
 (E) Where the chemicals or materials have the potential to be exposed to storm water discharges, the descriptions for each identified area must include a risk identification analysis of chemicals or materials stored or used within the area. The analysis must include the following: (i) Toxicity data of chemicals or materials used within the area, referencing appropriate material safety data sheet information locations. (ii) The frequency and typical quantity of listed chemicals or materials to be stored within the area. (iii) Potential ways in which storm water discharges may be exposed to listed chemicals and materials. (iv) The likelihood of the listed chemicals and materials to come into contact with storm water. 	No
(6) A narrative description of existing and planned management practices and measures to improve the quality of storm water run-off entering a water of the state. Descriptions must be created for existing or historical areas listed in subdivision (3)(J) through (3)(S) and any other areas thought to generate storm water discharges exposed to industrial activity and be a potential source of storm water exposure to pollutants. The description must include the following:	Yes
(A) Any existing or planned structural and nonstructural control practices and measures.	Yes
(B) Any treatment the storm water receives prior to leaving the facility property or entering a water of the state.	N/A
(C) The ultimate disposal of any solid or fluid wastes collected in structural control measures other than by discharge.	N/A
(7) If applicable, the specific control practices and measures for potential pollutant source areas must include the following:	
(A) Identification of areas that, due to topography, activities, or other factors, have a high potential for significant soil erosion and identify and implement measures to limit erosion.	N/A

SWPPP Requirement	Present in Draft SWPPP (January 2004)
(B) A plan to cover, or otherwise reduce the potential for pollutants in storm water discharge from, deicing salt and sand or other commercial or industrial material storage piles, except for exposure resulting from the addition or removal of materials from the pile. For piles that do not have the potential for polluting storm water run-off, the plan needs to provide the basis for determining no exposure potential. The plan must be included in the SWP3.	N/A
(C) Storage piles of sand and salt or other commercial or industrial materials must be stored in a manner to reduce the potential for polluted storm water run-off and in accordance with the plan required under clause (B).	N/A
(8) Information or other documentation required under subsection (d).	(see (d) below)
(9) The results of monitoring required in section 7.3 of this rule. The monitoring data must include completed field data sheets, chain-of-custody forms, and laboratory results. If the monitoring data is not placed into the facility's SWP3, the on-site location for storage of the information must be referenced in the SWP3. As two (2) or more sample monitoring events are completed, the laboratory results must be compared to indicate water quality improvements in the run-off from the facility. If the parameters and sample type are identical, historical storm water monitoring data at each discharge outfall identified in section 5(4) of this rule, or representative discharge outfall identified in section 5(5) of this rule, can be used in the comparison to provide data that is more reflective of initial water quality conditions.	N/A
(10) A mapped or narrative description of any such management practice or measure pursuant to subsection (c)(4) must be added to the SWP3.	Yes
(c) For areas of the facility that generate storm water discharges and have a reasonable potential for storm water exposure to pollutants, storm water exposure to pollutants must be minimized. To ensure this reduction, the following practices and measures must be planned and implemented:	
(1) A written preventative maintenance program, including the following:	
(A) Implementation of good housekeeping practices to ensure the facility will be operated in a clean and orderly manner and that pollutants will not have the potential to be exposed to storm water via vehicular tracking or other means.	Yes
(B) Maintenance of storm water management measures, for example, catch basins or the cleaning of oil or water separators. All maintenance must be documented and either contained in, or have the on-site record keeping location referenced in, the SWP3.	Yes
(C) Inspection and testing of facility equipment and systems that are in areas of the facility that generate storm water discharges and have a reasonable potential for storm water exposure to pollutants to ensure appropriate maintenance of such equipment and systems and to uncover conditions that could cause breakdowns or failures resulting in discharges of pollutants to surface waters.	N/A
(D) At a minimum, quarterly inspections of the storm water management measures and storm water run-off conveyances. Inspections must be documented and either contained in, or have the on-site record keeping location referenced in, the SWP3.	Annual inspections
(E) An employee training program to inform personnel at all levels of responsibility that have the potential to engage in industrial activities that impact storm water quality of the components and goals of the SWP3. Training must occur at a minimum annually and should address topics such as spill response, good housekeeping, and material management practices. All employee training sessions, including relevant storm water topics discussed and a roster of attendees, must be documented and either contained in, or have the on-site record keeping location referenced in, the SWP3.	Yes
(2) A written spill response program, including the following:	Yes (ISC/SPCC Plan)
(A) Location, description, and quantity of all response materials and equipment.	

SWPPP Requirement	Present in Draft SWPPP (January 2004)
(B) Response procedures for facility personnel to respond to a release.	
(C) Contact information for reporting spills, both for facility staff and external emergency response entities.	
(3) A written nonstorm water assessment, including the following:	Yes
(A) A certification letter stating that storm water discharges entering a water of the state have been evaluated for the presence of illicit discharges and nonstorm water contributions.	No
(B) Detergent or solvent-based washing of equipment or vehicles that would allow washwater additives to enter any storm drainage system or receiving water shall not be allowed at the facility.	N/A
(C) All interior maintenance area floor drains with the potential for maintenance fluids or other materials to enter storm sewers must be either sealed, connected to a sanitary sewer with prior authorization, or appropriately permitted under the NPDES wastewater program pursuant to 327 IAC 5. The sealing, sanitary sewer connecting, or permitting of drains under this item must be documented in the written nonstorm water assessment program.	N/A
(D) The certification shall include a description of the method used, the date of any testing, and the on-site drainage points that were directly observed during the test.	N/A
(4) If parameter reductions are not indicated in the comparison conducted under subsection (b)(9) and they cannot be attributed to laboratory error or significant variability in the rainfall events, the source of the pollutant parameter must be investigated and either eliminated or reduced via a management practice or measure to the extent technologically practicable and cost beneficial. A lack of reduction does not, in and of itself, constitute a violation of this permit. However, insufficient reductions may be used to identify facilities that would be more appropriately covered under an individual storm water NPDES permit. If parameter concentrations are at, or below, laboratory detection limitations, further reductions are not necessary.	N/A
(d) The SWP3 must meet the following general requirements:	
(1) The plan shall be certified by a qualified professional. "Qualified professional" means an individual who is trained and experienced in storm water treatment techniques and related fields as may be demonstrated by state registration, professional certification, experience, or completion of coursework that enable the individual to make sound, professional judgments regarding storm water control or treatment and monitoring, pollutant fate and transport, and drainage planning.	Yes (Will be certified by Mr. Kevin Reilly, DNSC Director of Environmental Management)
(2) The plan shall be retained at the facility and be available for review by a representative of the commissioner upon request or, in the case of a storm water discharge exposed to industrial activity which discharges through a regulated municipal separate storm sewer system conveyance, by the operator or operators of the regulated municipal system.	Yes
(3) The plan must be completed and implemented on or before three hundred sixty-five (365) days after submission of a timely-submitted initial NOI letter or the expiration date of the previous five (5) year permit term. The commissioner may grant an extension of this time frame based on a request by the person showing reasonable cause.	N/A
(4) The person having financial responsibility or operational control for a facility shall complete and submit to the commissioner a storm water pollution prevention plan certification checklist form within thirty (30) days of the plan completion date, but no later than three hundred sixty-five (365) days after the submission of a timely-submitted initial NOI letter or the expiration date of the previous five (5) year permit term. This checklist must also be signed by a qualified professional.	N/A
(5) A permittee regulated under this rule shall amend the plan by either of the following:	N/A

ECAS AUDIT REPORT

SWPPP Requirement	Present in Draft SWPPP (January 2004)
(A) Whenever there is a change in design, construction, operation, or maintenance at the facility, which may have a significant	
effect on the potential for the discharge of pollutants to surface waters of the state.	
(B) Upon written notice by the commissioner that the SWP3 proves to be ineffective in controlling pollutants in storm water	
discharges exposed to industrial activity. Within sixty (60) days of such notification from the commissioner, the permittee shall	
make the required changes to the SWP3 and shall submit the amended plan to the commissioner for review.	
(6) If a permittee has other written plans, required under applicable federal or state law, such as operation and maintenance, spill	N/A
prevention control and countermeasures, or risk contingency plans, which fulfill certain requirements of a SWP3, these plans may be	
referenced, at the permittee's discretion, in the appropriate sections of the SWP3 to meet those section requirements.	
(7) A permittee may combine the requirements of the SWP3 with another written plan if:	N/A
(A) the plan is retained at the facility and available for review;	- ·
(B) all the requirements of the SWP3 are contained within the plan; and	
(C) a separate, labeled section is utilized in the plan for the SWP3 requirements.	

Bhate Project No. 9030294

April 2004